

VZCZCXRO5415
PP RUEHCI
DE RUEHKA #0730/01 1240727
ZNY CCCCC ZZH
P 040727Z MAY 07
FM AMEMBASSY DHAKA
TO RUEHC/SECSTATE WASHDC PRIORITY 3967
INFO RUEHNE/AMEMBASSY NEW DELHI PRIORITY 9872
RUEHIL/AMEMBASSY ISLAMABAD PRIORITY 1631
RUEHKT/AMEMBASSY KATHMANDU PRIORITY 9069
RUEHGO/AMEMBASSY RANGOON PRIORITY 2537
RUEHLM/AMEMBASSY COLOMBO PRIORITY 7908
RUEHCI/AMCONSUL CALCUTTA PRIORITY
RUEKJCS/SECDEF WASHINGTON DC//ISA/NESA PRIORITY
RUEKDIA/JOINT STAFF WASHINGTON DC//J2/J5 PRIORITY
RHHMUNA/CDR USPACOM HONOLULU HI//J2/J4/J5 PRIORITY

C O N F I D E N T I A L SECTION 01 OF 02 DHAKA 000730

SIPDIS

SIPDIS

DEPARTMENT PLEASE PASS TO AIAG/HOLLIS SUMMERS, AIAG/TONY
NEWTON AND AIAG/NICHOLAS STUDZINSKI
DELHI PLEASE PASS TO FAS/OLIVER FLAKE

E.O. 12958: DECL: 04/30/2017

TAGS: [TBIO](#) [KFLU](#) [EAID](#) [PREL](#) [PGOV](#) [BG](#)

SUBJECT: LABORATORY CAPACITY IN BANGLADESH

REF: A. DHAKA 626

[1](#)B. DHAKA 608

[1](#)C. AND PREVIOUS

Classified By: ADCM D. MCCULLOUGH FOR REASONS 1.4(b)

[1](#)1. (SBU) SUMMARY. H5N1 continues to spread in Bangladesh, with confirmed poultry infections reported in nine of 64 districts but still no confirmed human cases. Numerous meetings between donors, experts, and the relevant GOB ministries have raised the question of Bangladesh's laboratory capacity, both human and veterinary, as it relates to avian influenza. This capacity, already strained on the veterinary side with the current outbreak, is in need of serious attention before it can be expected to handle the anticipated load coming from planned active surveillance programs. END SUMMARY.

[1](#)2. (SBU) VETRINARY LABS. Under the Ministry of Fisheries and Livestock, there are eight total Field Disease Investigating Laboratories, located in the districts of Feni, Barisal, Manikganj, Sylhet, Jaiphurat, Gaibanha, Sirajganj and Mymensingh. The latter two, Sirajganj and Mymensingh, are self-identified by the Ministry as being 'in need of urgent overhauling'. The Central Disease Investigation Laboratory is in Savar, just north of Dhaka, as is the National Reference Laboratory at the Bangladesh Livestock Research Institute. Both DANIDA and JICA have projects underway to improve the National Reference Laboratory's capacity, including PCR testing and other lab equipment provided by DANIDA which is estimated to arrive in May/June of this year. There is currently no significant private veterinary lab capacity for H5N1 testing in Bangladesh.

[1](#)3. (C) FALSE POSITIVE H5N1 TEST. Recently, the National Reference Laboratory at the National Livestock Research Institute obtained positive results for H5N1 when testing specimens by conventional PCR methods. When quality control specimens were sent to an international reference lab in the UK, the samples tested negative for H5N1. Upon further analysis, they found H9N2 (low pathogenic avian influenza). The PCR test should not have given a false positive result without either procedural error or equipment failure, either of which calls into question the existing lab's capacity to handle current requirements much less any expansion. H5N1 has still been confirmed in Bangladesh through other samples by international testing, but unreliable domestic tests will

increase delays in obtaining reliable results and unnecessarily increase workloads at the international reference labs.

¶4. (SBU) NON GOVERNMENT HUMAN LABS. ICDDR,B is a NGO with a strong reputation in public health. They are in the process of upgrading their facilities with a HHS/CDC grant to biosafety level three, and are implementing a 12 hospital surveillance program throughout Bangladesh in conjunction with the GOB.

¶5. (SBU) GOVERNMENT HUMAN LABS. The Institute of Epidemiology, Disease Control and Research (IECDR) is the Bangladesh national institute for conducting disease surveillance and outbreak investigation. It has signed an agreement with the CDC to establish this surveillance using standardized data collection, developed training for local public health workers, and improve communication and data exchange between labs and epidemiologists in the global influenza surveillance network. Improvements to the laboratory diagnostic capacity are a prerequisite objective, necessary for most of the others to move forward.

¶6. (C) PROBLEMS WITH THE HHS GRANT TO IECDR. Initially, \$375,000 was allocated as a grant directly to IECDR to accomplish these objectives. The government subsequently decided that this is irregular, and the funds must instead go to the Ministry instead for allocation through the Health Nutrition and Population Sector Program. Sources estimate this may delay IECDR's receipt of these funds by as much as eight months. AID is currently discussing this issue with their contacts in the Health Ministry and will coordinate appropriate responses with State and HHS.

DHAKA 00000730 002 OF 002

¶7. (C) COMMENT. Laboratory capacity, and its effective use, is clearly going to become more critical as this outbreak progresses. Almost no negative surveillance (surveillance of seemingly healthy birds verifying that they are not H5N1 infected) is taking place. Adding that new requirement to an already stretched lab capacity is a recipe for disaster, with the recent inaccurate results possibly already showing the existing system's limitations. International donors are showing interest in building laboratory capacity, but how quickly GOB facilities can absorb and manage new equipment will be a factor, especially in the currently more critical veterinary sector.
BUTENIS